



Building your primary care multidisciplinary team:

PARAMEDICS

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INTRODUCTION

The past few years in primary care has brought about arguably unprecedented changes in how we deliver care to patients. The challenges we face have brought about new ways of working, and provided an opportunity to embrace Allied Health Professionals and the contribution they make to a multi-disciplinary primary care team. Rewind only five years and it was unusual to see a Paramedic working in primary care. Now, Specialist and Advanced Paramedic Practitioners can be found in half of all Somerset general practices. There are around fifty practitioners in general practice across the county, supporting primary care teams in a variety of ways, from exclusively assessing and treating housebound patients, to running urgent clinics, managing single issue presentation patients, as well as more complex cases including referrals and follow up, within their scope of practice. With recent legislative and regulative changes, Paramedics are also now able to complete Non-Medical Prescribing courses and are eligible to apply for Level 7 (Masters) Advanced Practitioner qualifications, making them highly effective and valued members of multidisciplinary primary care teams.

This document sets out some of the varied ways practices can employ, train and support Paramedics within their teams. Given the relatively rapid growth of Paramedics in primary care the formal qualification and training pathways are only now catching up, but we hope an understanding of what support and development is available for this group of staff will be helpful for you in developing a multidisciplinary team providing excellent patient care.

UNDERSTANDING THE PARAMEDIC ROLE

Professional Registration

The job title Paramedic is protected in law. All Paramedics using the title are required to be registered and regulated by the Health and Care Professions Council (HCPC). The HCPC sets the standards expected which form the foundations of their regulation and expectations for registrants and education and training programmes.

Education

Historically Paramedic education was provided by Institute of Health and Care Development (IHCD) approved in-house courses. In the early 2000s Higher Education Institutes (HEIs) began to introduce degree level Paramedic qualifications. In September 2021 the HCPC changed the threshold level of qualification for entry to the Register for Paramedics to Bachelor degree with honours, or equivalent. This was concluded necessary to deliver the standards of proficiency to the depth required for contemporary Paramedic practice. Existing registrants were not directly affected and Paramedics registered prior to this date may have varying education and qualifications due to the rapid development of the Paramedic role in recent years.

Until such time as current educational requirements become embedded in a developing workforce, you are likely to see experienced Paramedics with varying qualifications. These will include: IHCD in-house Ambulance Trust Paramedic courses; Foundation Degrees/BSc degrees (with and without Honours) in Paramedic sciences or similar; additional in-house or undergraduate degree (Level 6) Emergency Care Practitioner qualifications; post graduate Level 7 studies including Advanced Practice Certificates, Diplomas and full Masters degrees.

The College of Paramedics

The College of Paramedics (CoP) is the recognised professional body for Paramedics and the ambulance profession in the UK. Members are represented in all matters affecting their clinical practice, supporting them to achieve the highest standards of patient care. Support to the profession includes recommendations for continuing professional development (as a requirement of registration); frameworks for career progression and prescribing competencies.

The CoP supports the development of Paramedic practice in primary care, recognising the contribution that Paramedics make to effective and safe care in community settings. The College employ a Primary Care Paramedic Lead to support this developing area. In 2019 the College partnered with Health Education England and Skills for Health to produce the <u>Paramedic Specialist in Primary and Urgent Care Core Capabilities Framework</u> and has produced the Employers' Guide for Paramedics in Primary and Urgent Care.

Paramedic Career Framework

Heath Education England (HEE) in conjunction with the College of Paramedics has developed the <u>Paramedic Career Framework</u>, a guide to career development and the standard competency Framework. A Scope of Practice sets out the skills and abilities a registered group of staff should have and describes the processes, procedures and actions that this group can undertake within their scope of practice.

The Framework aims to support General Practice to understand the current level of Paramedic you may be seeking to employ or to develop the future career of a Paramedic in primary care.

In addition, there are several examples of guidance documents for employing Paramedics in primary care, including job descriptions and competencies.

Paramedics without additional training or non-emergency care experience have capabilities that are applicable across a variety of patients, including adults, children and pregnant women. These are the core clinical skills, but as the Paramedic progresses through the career framework, they will develop additional skills according to the environment in which they work.

Leadership and Management Career Framework 2018 Honours PG Dip Masters Doctorate ofesso HEA Research and Davelor Principal Fellow HEA Senior Fellow HEA Fellow © College of Paramedics, 2018

College of Paramedics

Health Education England (HEE) Roadmap to Advanced Practice

In recognition of Advanced Practice HEE have introduced allied health professional "Roadmaps to Advanced Practice". Paramedic Roadmap was introduced January 2021, the First Contact Practitioners and Advanced Practitioners in Primary Care: (Paramedics) - A Roadmap to Practice is a supportive document outlining the pathway to advanced practice for clinicians wishing to pursue a career in primary care. The guidance supports development from undergraduate level qualification (or equivalent experience) to Level 7/Masters level qualification (or



equivalent experience). Clinicians completing the capability framework will be recognised by Health Education England's Centre for Advancing Practice as either First Contact Practitioners (FCPs) or Advanced Practitioners (APs).

Practitioners employed under the Additional Roles Reimbursement Scheme (ARRS) contract are required to have evidence of working at this level, needing to complete the Roadmap stages 1 and 2 as a minimum (or an Advanced Practice Masters in Primary Care). Those not employed under the ARRS did not previously have a requirement to complete the Roadmap though it was recommended. A recent announcement by the Care Quality Commission (CQC) however, has outlined the expectation that all non-medical practitioners working in a First Contact role, including Paramedics, are required to complete stage 1 of the Roadmap prior to working in primary care and subsequent stages once in practice. The implication is that current Paramedics

working in practice are expected to be completing the Roadmap if working in an FCP or equivalent role.

The Roadmap outlines the skills and attributes needed for Paramedics become FCPs or APs and sets out the specific supervision and governance requirements. This allows employers and workforce planners to understand what support is required for clinicians completing the Roadmap and also what the clinicians can offer to the multi-professional team to enable the best care for their patient population, providing a gold standard of care and putting patient safety first.

The Roadmap can be completed either by higher education institute taught route, or by the completion of a portfolio of evidence. At the time of writing the Roadmap capabilities are beginning to be mapped with higher education courses both nationally and at South West universities. New modules are being designed specifically to meet the capabilities are being introduced (with the first starting in March 2022).

For Paramedics already in FCP or AP equivalent roles the retrospective portfolio route is available. All clinicians completing the Roadmap via the portfolio route require a named Roadmap Supervisor, as detailed in the Roadmap document. Supervisors will be required to have completed an approved two-day training programme or be a GP trainer. For clinicians taking the portfolio route completion of Level 7 Masters modules is not a requirement, however they will be required to evidence work at Level 7 standard.

Scope of Practice

Paramedics new to primary care will be experienced emergency clinical practitioners skilled in urgent and emergency presentations. Many of those skills are transferable into primary care and Paramedic strengths lie in their adaptability, assessment skills, ability to identify red flags and escalate concerns. However, some wider assessment and diagnostic skills common in primary care are likely to require development, depending on the Paramedic's background. Commonly, in addition to basic Paramedic qualification, a formal diagnostic qualification is often sought by employers, preferably at Masters/Level 7. Assessment of the scope of practice and additional qualifications of the individual would be advisable and appropriate professional development identified. Paramedics with no primary care experience should be familiar with acute out of hospital presentations in the following areas:

- Respiratory system
- Cardiovascular system
- Gastrointestinal and genitourinary system (GI and GU)
- Nervous system
- Musculoskeletal system
- Head, neck, ears, nose and throat (HNENT)
- Eyes and skin
- Mental health
- Social and psychosocial needs
- Palliative and end of life care
- The acutely unwell patient (medical and trauma)
- Pre or out of hospital diagnostics and procedures
- Pre or out of hospital therapeutics
- Resuscitation advanced life support

Paramedic Roles

As a title protected by law only someone entered on the <u>HCPC register</u> can use the Paramedic job title. No other variations of the title are currently protected in this way. Titles of job roles vary between employers, however using the CoP career framework we can give examples of how clinical Paramedic roles translate into primary care:

Paramedic – depending when the clinician entered the workforce, they will have undergone a degree level programme in Paramedic Science or equivalent Paramedic training programme. Typically, Paramedics have no additional specialist primary care training but are often employed as home visiting clinicians to carry out assessments, with heavy oversight from a GP or appropriate clinician who will have responsibility for the diagnostic and decision-making process.

Specialist Paramedic — often known as Emergency Care Practitioners, Paramedic Practitioners or Primary Care Practitioners, Specialist Paramedics have undergone additional professional development either with a Higher Education Institute, an Ambulance Trust or with a primary or urgent care employer. This can include Masters/Level 7 modules, or in-house Continuing Professional Development (CPD) and work-based development. Specialist Paramedics will have additional diagnostic and assessment skills and usually be required to carry out home visits and surgery-based clinics with an agreed level of autonomy within their defined scope of practice, with access to senior clinical supervision as required.

The HEE First Contact Practitioner (FCP) role in primary care corresponds with the Specialist Paramedic role. HEE recently described the role of FCP as a diagnostic clinician working at a clinically Advanced level. This allows the FCP to be able to assess and manage undifferentiated and undiagnosed presentations referring to a GP only when required. FCPs are considered to be working at Masters level, or the equivalent of Agenda for Change Band 7 or above. To become a FCP, recognition is required through the HEE Roadmap to practice, having completed a taught or portfolio route.

The Human Medicines (Amendment) Regulations 2018 means that as of 1st April 2018 Paramedics working at an advanced level of clinical practice can become independent prescribers*. Paramedics are annotated on the HCPC register as an independent prescriber after successful completion of an approved independent prescribing programme.

*Paramedic non-medical independent prescribers are unable to prescribe controlled drugs due to a delay in amending legislation. It is anticipated that this will change although no timescale is currently anticipated due to the impact of the pandemic

Advanced Paramedic – In addition to the clinical advanced practice of FCPs, Advanced Paramedics will have undergone Masters Level training and professional development which encompasses the four pillars of Advanced Practice: Clinical Practice, Facilitating Learning, Leadership, and management, Research and Development). This can be achieved by completing a full Advanced Practice Masters qualification, alternatively FCPs can evidence additional advanced

practice competencies through the portfolio route for recognition by HEE as an Advanced Practitioner. HEE stipulates in the Roadmap that the role of Advanced Practitioner must include work reflecting the four pillars of Advanced Practice.

RECRUITING PARAMEDICS

Appointing the correct candidate on the correct contract to meet your needs is key to successfully integrating Paramedics into multidisciplinary teams. Paramedic employment opportunities are considerably more varied now than they ever have been, offering employers and employees flexible options. When recruiting you may wish to consider which employment model will best fit your practice.

Types of Contract

- Direct employment with the surgery
- Primary Care Network (PCN) contract, role often shared across practices
- Additional Roles Reimbursement Scheme (ARRS)
- Rotational Post (South Western Ambulance Service NHS Foundation Trust SWASfT)
- Locum/agency staff

Offering direct employment contracts, whether with a surgery or PCN, allows for the greatest degree of flexibility depending on the employee and employer requirements. Consideration should be given to the candidate's current level of training and qualification and any need for further qualification or development.

Contracts such as the ARRS and Rotational Posts have training and support requirements which the employer will be obligated to fulfill. This does however offer a structured employment and development approach. Employees contracted in ARRS roles are required to complete the HEE Roadmap to Advanced Practice. Rotational Posts have been developed by Ambulance Trusts with the aim of benefiting both primary and emergency care by primary care experience being

taken back into emergency care to empower admission avoidance and more appropriate signposting and vice versa, the practice benefits from current emergency care expertise. At time of writing the Rotational Post contract has not been formalised, however considerations should be given to: the practicalities of supporting two staff to make up one whole time equivalent as the post rotates; Human Resources responsibilities such as provision of cover for sickness/annual leave etc; cost of NI/pension contributions; annual leave and expenses payments; line management responsibility and the resilience of employing under this contract.

Job Descriptions

The use of job descriptions is recommended for all Advanced Practice roles. Guidance, resources and FCP Allied Health Professional example job descriptions can be found on the england.nhs.uk website and it is worth scanning through NHS jobs at active recruitment adverts to get ideas as well.

Pay and Conditions

Pay and conditions will largely be determined by the type of contract the Paramedic is employed under. Broadly speaking the different roles identified in the skills framework and Roadmap to Practice documents, when compared to the NHS Agenda for Change pay structure suggest the following:

- Paramedic: Band 6
- Specialist Paramedic/Paramedic Practitioner/FCP: Band 7
- Advanced Paramedic Practitioner (ACP):

 Band 8a

Supervision and Continuing Professional Development

Any health professional working in general practice will need to have appropriate clinical supervision on a day-to-day basis. The level of supervision and development Paramedics will require from the employer will be dependent on the qualifications and experience of the individual Paramedic.

For those new to practice or developing their careers, educational supervision may also be required depending on the qualification they are pursuing. Educational supervision for HEI based qualifications are provided by the HEI institution, and where required with some specified clinical supervision in practice.

Experienced advanced level Paramedics who have worked in general practice previously are likely to have completed some if not all of the qualifications or equivalent evidence required to meet HEE Roadmap and CQC requirements in order to complete the Roadmap via a portfolio route. If a Paramedic wishes to complete the Roadmap via portfolio route then they will need a named Roadmap Supervisor who has undertaken the appropriate HEE Training to do so. For FCP (Stage 1 and 2 of the Roadmap) this can be an HEE recognised FCP, AP or GP who has undergone the relevant 2 day HEE Roadmap Supervisor Training, or a GP trainer who has undergone a shorter HEE Roadmap Supervisor course. To complete the Roadmap to Advanced Practitioner level (Stage 3) the clinicians Supervisor will need to be an AP, GP or GP Trainer who has undergone the relevant Supervisor Training, with final sign off by HEE. Rotational Paramedic contracts have yet to be formalised but there is likely to be specific supervision requirements as these will be Paramedics unlikely to have any previous primary care experience.

Paramedics new to primary care will require a greater degree of appropriate CPD support and day-to-day supervision to meet the requirements of the HEE Roadmap Stage 1 and Stage 2 to

FCP level (as a minimum) and it should be anticipated that Higher Education modules are likely to be the most appropriate form of CPD to achieve this. A number of options which are constantly developing and being updated are available, including:

- Bespoke First Contact Practitioner Level 7 (Masters) modules mapped to the HEE Roadmap competencies and designed to meet Stage 1 requirements of the Roadmap are the most recent addition to the opportunities available. An example can be found at the University of Plymouth
- Advanced Practice modules (such as those offered by the <u>University of the West of England</u>) can be undertaken as stand-alone modules or build up to post graduate certificates, diplomas or full Masters degrees. Although not currently mapped directly to the HEE Roadmap, many modules will provide the evidence required to meet the competencies via the portfolio route.
- Advanced Practice Apprenticeship routes are now offered at South West universities
 (including the <u>University of Exeter</u>) and could be a good option for a Paramedic starting
 out in primary care and aiming to become an Advanced Practitioner, one benefit for
 employers is the apprenticeship levy should be applicable.

Funding for courses could be considered through HEE, they have published a <u>guide to</u> <u>implementing and funding advanced practice</u> which outlines the annual application process as well as further details of the options available. PCN workforce training funds are another potential source of funding and one off funding opportunities also arise which the Training Hub communicate both through the Somerset General Practice Education Trust (SGPET) updates and directly to the Paramedic staff group.

CONTACT

Paramedics in General Practice have been making a valuable contribution to patient care in Somerset for many years. If you are interested in employing a Paramedic and would like to discuss it further, or have queries not answered in this booklet please contact the Somerset Local Medical Committee Office in the first instance who will put you touch with the appropriate member of the Allied Health Professional support team.

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